

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------------|-------------|-----------------|
| FEE DETERMINATION | <i>no secret</i> | | <i>7/6/01</i> |
| O.I.P.E. CLASSIFIER | | <i>8</i> | <i>7/30/01</i> |
| FORMALITY REVIEW | <i>MH</i> | <i>920</i> | <i>08-21-01</i> |
| RESPONSE FORMALITY REVIEW | <i>P M</i> | <i>FSI</i> | <i>10-23-01</i> |
| | <i>A.T</i> | <i>1071</i> | <i>11/30/01</i> |

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

732
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523
11-30-01